MaineDOT

CONSULTANT CONTRACT STANDARD INVOICE

Regional - Negotiated Rates - WITH Sub Consultants

WORKBOOK GUIDE

(Microsoft Excel 2002)

EACH INVOICE SUBMITTED MUST:

- 1. CONTAIN DATA FOR ONE CONTRACT ONLY, INCLUDING MULTI-PIN DETAIL AS APPROPRIATE.
- 2. CONTAIN A "CONSULTANT INVOICE NUMBER" THAT IS UNIQUE TO THAT FIRM AND CONTRACT WITH NO MORE THAN 12 CHARACTER FIELDS USED (including punctuation and spaces).
- 3. INCLUDE THE SAME SUPPORTING INFORMATION ATTACHED TO THE INVOICE AS IN THE PAST.
- 1) Do not try to enter data into blue colored cells, they are filled by formula, or by link from another cell in the workbook. Yellow and pink colored cells are for data entry. Yellow cells should only require data entry with the first invoice for a contract; pink cells will need review and possibly update with each invoice submitted.
- 2) Sheet 2 of 3, top right side, "Final Invoice?", must indicate either "yes" or "no" and should not be left blank. This not only aids processing, but also provides critical data for formulas and cells on other sheets.
- 3) The MaineDOT PIN field is preformatted to produce an 8 digit number in decimal format. Do not enter a decimal point. The last 2 digits entered must be the 2 digits to the right of the decimal (even zeros), but no decimal should be shown. Do not enter leading zeros.
- 4) The payment address can be entered directly on Sheet 1 if it is different than the firm address entered on the Main Data Entry form.
- 5) Comment boxes have been added to a number of data entry fields to help clarify input intentions, or identify specific needs in those cells.
- 6) Function and Activity coding for PIN lines on Sheet 3 of 3 is not mandatory to submit a completed invoice, but should be entered if known, especially for multiPIN projects.
- 7) Regional "Invoice Detail" sheets have been added to this workbook to allow for sign-off by Regional Managers, as well as roll up into a "(SUM)2of3InvoiceDetail" sheet in a "master" invoice. Individual sheets can be shared electronically and printed for local signature.

Internal Use Only Sheet 1 of 4 **State of Maine Department of Transportation Transportation Building 16 State House Station** P.V. #: **REGIONAL** Negotiated Augusta, Maine 04333-0016 ENC/UENC #: **Burdened Rates** CSN #: **In Account With** Firm Federal I.D. #: (WITH SUB CONSULTANTS) TEDOCS #: =Firm Name Doc. Date: Street (PO Box) Doc. Type: =Pavment mailing address Town, State ZIP OUC: Author: Firm Federal ID # => Consultant Invoice Number: **Invoice Date:** Invoice Period: **Project Contract Number:** Consultant Project #: **Project Contract Award Date:** MaineDOT PIN: Federal Project #: **Project Contract Completion Date:** Project Name: I hereby certify that the signature below is true and accurate. I further certify, if electronic, that it (a) is intended to have the same force as a manual signature, (b) is unique to myself, (c) is capable of verification, and (d) is under the sole control of myself. Initials: Cumulative Signed: Amount **Total Amount** Contract Please Type: Name, Title **Invoiced This Amount Invoiced Contract Amounts** Previously Invoiced **Balance** Period To Date Straight Time/Work = Overtime = Sub-Total = Direct Expenses = Subconsultant Summary: DBE/WBE => yes/no Sub-Total: Subconsultants = Total Invoice Amounts = **TOTAL AMOUNT DUE THIS INVOICE** Approved by: Reviewed by: MaineDOT Program/Project Manager MaineDOT Contract Specialist Date Date (Work performed as specified) (Cleared for processing)

		Maine Department of Transportation							(SUM) Sheet 2 of 4								
					Cons	ultan	t Stand	dard Inv	oice	Det	ail						
Contract Information			ı														•
State Contract #												<u>Final</u>	<u> Invoice ?</u>	YES/No) => =>		
MaineDOT Contract Sequence # (CSN)				Company										1			
Consultant Project #				FI	rm Name					Name				0	D!		
Award Date (mm/dd/yy)				A	Address					t (PO B , State 2	•				int Project #: ineDOT PIN:		
Completion Date (mm/dd/yy) Contract Total Straight Time \$				Firm	Federal I	D#			TOWIT	, State 2	LIF			-	ral Project #:		
Contract Total Overtime \$				Firm Is Di											tle/Location:		
Contract Total Expenses \$						() ()								,			
,																	
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Invoice Information				COMME	NTS:												
Invoice Date (mm/dd/yy)																	
Consultant Invoice #																	
Invoice Start Date (mm/dd/yy)																	
Invoice End Date (mm/dd/yy) Previously Invoiced Straight Time \$																	
Previously Invoiced Overtime \$																	
Previously Invoiced Expenses \$																	
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Invoice Detail - Labor and Expens																	
Invoice Detail - Labor and Expens	<u>303</u> .	I		<= Burden			7-4-		II			Dinas	4 Fvmanaa	Datail .			I
	MaineDOT		Straight T		ea or Cor	Overtim		Straight/OT		Milea	ne	<= Direc	t Expense Postage		I	1	
Individual - NAME, Title		Work			Work	l	1	Total				Travel	Delivery	Phone	Other	Direct	Total
	<u>PIN</u>	<u>Unit</u>	Rate	<u>Amount</u>	<u>Unit</u>	Rate	<u>Amount</u>	<u>Amount</u>	#	Rate	Amount		Printing	FAX		Expense Total	THIS INVOICE
Name 1, Title 1 Name 2, Title 2	000000.00	0.000	0.0000		0.000	0.0000											
Name 3, Title 3																	

INVOICE TOTALS = (Includes Regional Sheets if used)

Maine Department of Transportation (Region 1) Sheet 2 Consultant Standard Invoice Detail - Region 1 Contract Information Final Invoice ? YES/NO => => State Contract # MaineDOT Contract Sequence # (CSN) Company Information Consultant Project # Firm Name Award Date (mm/dd/yy) Consultant Project #: Address MaineDOT PIN: Completion Date (mm/dd/yy) **Contract Total Straight Time \$** Firm Federal ID# Federal Project #: Firm Is DBE/WBE (yes/no) **Contract Total Overtime \$** Project Title/Location: **Contract Total Expenses \$** (Work performed as specified) **Invoice Information** Invoice Date (mm/dd/yy) Consultant Invoice # Date MaineDOT Manager - Region 1 Invoice Start Date (mm/dd/yy) Invoice End Date (mm/dd/yy) COMMENTS: Previously Invoiced Straight Time \$ **Previously Invoiced Overtime \$ Previously Invoiced Total \$** Invoice Detail - Labor and Expenses: <= Burdened or Commercial Rate => <= Direct Expense Detail => MaineDOT Straight Time Overtime Mileage Postage Straight/OT Phone Direct Total Individual - NAME, Title Work Travel Delivery Other Work **Total Amount** FAX Expense Total THIS INVOICE PIN Rate **Amount** Rate **Amount** Rate Amount <u>Unit</u> <u>Unit</u> Printing Name 1, Title 1 00.00000 0.000 0.0000 0.000 0.0000 Name 2, Title 2 Name 3, Title 3

Maine Department of Transportation (Region 2) Sheet 2 Consultant Standard Invoice Detail - Region 2 Contract Information Final Invoice ? YES/NO => => State Contract # MaineDOT Contract Sequence # (CSN) Company Information Firm Name Consultant Project # Consultant Project #: Award Date (mm/dd/yy) Address Completion Date (mm/dd/yy) MaineDOT PIN: Firm Federal ID# Federal Project #: **Contract Total Straight Time \$** Firm Is DBE/WBE (yes/no) Project Title/Location: Contract Total Overtime \$ Contract Total Expenses \$ (Work performed as specified) **Invoice Information** Invoice Date (mm/dd/yy) Consultant Invoice # MaineDOT Manager - Region 2 Invoice Start Date (mm/dd/yy) Invoice End Date (mm/dd/yy) COMMENTS: **Previously Invoiced Straight Time \$ Previously Invoiced Overtime \$ Previously Invoiced Total \$** Invoice Detail - Labor and Expenses: <= Burdened or Commercial Rate => <= Direct Expense Detail => Overtime Straight Time Postage MaineDOT Mileage Straight/OT Phone Direct Total Individual - NAME, Title Work Travel Delivery Other Work THIS INVOICE <u>Amount</u> **Total Amount** Expense Total PIN Rate **Amount** Rate Rate Amount Printing <u>Unit</u> <u>Unit</u> Name 1, Title 1 000000.00 0.0000 0.0000 0.000 0.000 Name 2, Title 2 Name 3, Title 3

Maine Department of Transportation (Region 3) Sheet 2 Consultant Standard Invoice Detail - Region 3 Contract Information Final Invoice ? YES/NO => => State Contract # Company Information MaineDOT Contract Sequence # (CSN) Firm Name Consultant Project # Award Date (mm/dd/yy) Consultant Project #: Address MaineDOT PIN: Completion Date (mm/dd/yy) **Contract Total Straight Time \$** Firm Federal ID # Federal Project #: Firm Is DBE/WBE (yes/no) **Contract Total Overtime \$** Project Title/Location: **Contract Total Expenses \$** (Work performed as specified) **Invoice Information** Invoice Date (mm/dd/yy) Consultant Invoice # MaineDOT Manager - Region 3 Invoice Start Date (mm/dd/vv) Invoice End Date (mm/dd/yy) COMMENTS: **Previously Invoiced Straight Time \$ Previously Invoiced Overtime \$** Previously Invoiced Total \$ Invoice Detail - Labor and Expenses: <= Burdened or Commercial Rate => <= Direct Expense Detail => Straight Time Overtime Mileage Postage MaineDOT Phone Straight/OT Direct Total Delivery Other Individual - NAME, Title Travel Work Work THIS INVOICE PIN Rate Amount Rate Amount Total Amount Rate Amount FAX Expense Total Printing <u>Unit</u> <u>Unit</u> 000000.00 0.0000 Name 1, Title 1 0.000 0.0000 Name 2, Title 2 Name 3, Title 3

Maine Department of Transportation (Region 4) Sheet 2 Consultant Standard Invoice Detail - Region 4 Contract Information Final Invoice ? YES/NO => => State Contract # MaineDOT Contract Sequence # (CSN) Company Information Firm Name Consultant Project # Consultant Project #: Award Date (mm/dd/yy) Address Completion Date (mm/dd/yy) MaineDOT PIN: Firm Federal ID# Federal Project #: **Contract Total Straight Time \$** Firm Is DBE/WBE (yes/no) Project Title/Location: **Contract Total Overtime \$** Contract Total Expenses \$ (Work performed as specified) **Invoice Information** Invoice Date (mm/dd/yy) Consultant Invoice # MaineDOT Manager - Region 4 Invoice Start Date (mm/dd/yy) Invoice End Date (mm/dd/yy) COMMENTS: **Previously Invoiced Straight Time \$ Previously Invoiced Overtime \$ Previously Invoiced Total \$** Invoice Detail - Labor and Expenses: <= Burdened or Commercial Rate => <= Direct Expense Detail => Overtime Mileage Straight Time Postage MaineDOT Straight/OT Phone Direct Total Individual - NAME, Title Work Travel Delivery Other Work THIS INVOICE <u>Amount</u> **Total Amount** FAX Expense Total PIN Rate **Amount** Rate Rate Amount Printing <u>Unit</u> <u>Unit</u> Name 1, Title 1 000000.00 0.0000 0.0000 0.000 0.000 0.00 0.00 0.00 0.0 Name 2, Title 2 Name 3, Title 3

Maine Department of Transportation (Region 5) Sheet 2 Consultant Standard Invoice Detail - Region 5 Contract Information Final Invoice ? YES/NO => => State Contract # MaineDOT Contract Sequence # (CSN) Company Information Firm Name Consultant Project # Consultant Project #: Award Date (mm/dd/yy) Address Completion Date (mm/dd/yy) MaineDOT PIN: Firm Federal ID# Federal Project #: **Contract Total Straight Time \$** Firm Is DBE/WBE (yes/no) Project Title/Location: **Contract Total Overtime \$** Contract Total Expenses \$ (Work performed as specified) **Invoice Information** Invoice Date (mm/dd/yy) Consultant Invoice # MaineDOT Manager - Region 5 Invoice Start Date (mm/dd/yy) Invoice End Date (mm/dd/yy) COMMENTS: **Previously Invoiced Straight Time \$ Previously Invoiced Overtime \$ Previously Invoiced Total \$** Invoice Detail - Labor and Expenses: <= Burdened or Commercial Rate => <= Direct Expense Detail => Overtime Mileage Straight Time Postage MaineDOT Straight/OT Phone Direct Total Individual - NAME, Title Work Travel Delivery Other Work THIS INVOICE <u>Amount</u> **Total Amount** FAX Expense Total PIN Rate **Amount** Rate Rate Amount Printing <u>Unit</u> <u>Unit</u> Name 1, Title 1 000000.00 0.0000 0.0000 0.000 0.000 0.00 0.00 0.00 0.0 Name 2, Title 2 Name 3, Title 3

CONSULTANT LETTERHEAD

Maine Department of Transportation - Consultant Standard Invoice

Invoice Date:

Sheet 4of4

PIN Detail

Consultant Name:		
Consultant Federal ID #:	Consultant Project #:	
Consultant Invoice #:	MaineDOT PIN:	
Invoice Period:	Federal Project #:	
Contract Number:	Project Title/Location:	
Contract Award Date:		
Contract Complete Date:		

MaineDOT PIN	Federal Project Number	Project Town Name(s)		oding Activity	Straight Work Amount	Overtime Amount	Direct Expense Amount	Sub Consultant Amount	PIN Total This Period
00.00000			000	XXX	0.00	0.00			
000000.00			000	XXX	0.00	0.00			
	TOTAL INVOICE AMOUNTS (Includes Sheet 3b if used					\$0.00	\$0.00	\$0.00	\$0
					rtime Invoice hose on Shee	Totals Above et 2of4		SubConsultar Matches	nt Total Abo

Sheet 3b of 4

Additional PIN Detail

Invoice Date:

Contract Number: Consultant Project #: MaineDOT PIN: Federal Project #: Project Title/Location:

	Fodoral Brainet PIN Coding Straight Overtime Direct Expanse Sub Consultant									
MaineDOT PIN	Federal Project Number	Town Name(s)	Function		Straight Work Amount	Overtime Amount	Direct Expense Amount	Sub Consultant Amount	PIN Total This Period	
					Amount					
					-					

								Sheet	4a of 4
			CONSUL	TANT LE	TTERHE	AD			
		Maine Depa	artmont of	Transnor	tation - St	andard Inv	voico	Invoice Date:	
			<u>Sub</u>	Consultan	t Detail				
						Consulta	nt Project #:		
Consultant Name:							ral Project #:		
Consultant Federal ID #: Consultant Invoice #:						Project 11	tle/Location:		
Invoice Period:									
Contract Number: Contract Award Date:									
Contract Complete Date:									
Summary of DBE/WBE F	Participation	1-							
	<u>artioipation</u>	<u> -</u>	Amo	unts This In	voice				
DBE/WBE - yes/no =>								Invoice	Invoice
	Subconsulant #1	Sub _{Cons} ulan	Subconsular #3	Subconsular	Sub _{CONSUL} AN	Subconsuffer #6	Sub _{CONSULT} AN	Sub Total	Sub Total
Subconsultants #1 - #7	nsull *	*	"sell"	nsul *	"sell	"su"	">«*	DBE/WBE Subs Only	All Subs
MaineDOT	30	30	30	90	30	90	90	#1-7	#1-7
PIN	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
000000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
INVOICE TOTALS #1 - #7 Previously Invoiced									
Subcontract Amount									
Subcontract Balance									
Total Contract Amount =				l	Invoice Total	s Subconsult	ants #1- #14		
Total Contract Amount =					<u>Va</u>	<u>lue</u>	<u>Pe</u> ro	centage_	
	_		nsultant Contra			_		DIV/0!	of Contract
	DBE	E Subconsulta Accrued					#		of Program of Contract
Accrued Contract Billings to Date = Accrued DBE Billings to Date =									of DBE Amount

Sheet 4b of 4

CONSULTANT LETTERHEAD

Invoice Date:

Maine Department of Transportation - Standard Invoice

Sub Consultant Detail

Summary of DBE/WBE Participation:

Contract Number: Contract Award Date: Contract Complete Date:

DBE/WBE - yes/no =>								Invoice	Invoice
Subconsultants #8 - #14 MaineDOT PIN	Subco	Subconsulari	Subconsulant	tue, 11#	tue _{ll} 21.#	tue ye start	Subconsuffant	Sub Total DBE/WBE Subs Only #8-14	Sub Total All Subs #8-14
000000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
INVOICE TOTALS #8 - #14									
Previously Invoiced									
Subcontract Amount									
Subcontract Balance									

Yes/No

Yes

No